

CLAIMS ONLY							Application Number 09821546		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				11/10/05		
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1			/								
2			/								
3			/								
4			/								
5			/								
6			/								
7			/								
8			/								
9			/								
10			/								
11			/								
12			/								
13			/								
14			/								
15			/								
16			/								
17			/								
18			/								
19			/								
20			/								
21			/								
22			/								
23			/								
24			/								
25			/								
26			/								
27			/								
28			/								
29			/								
30			/								
31			/								
32			/								
33			/								
34			/								
35			/								
36			/								
37			/								
38			/								
39			/								
40			/								
41			/								
42			/								
43			/								
44			/								
45			/								
46			/								
47			/								
48			/								
49			/								
50			/								
Total Indep			/								
Total Depend			/								
Total Claims			/								
51											
52											
53											
54											
55											
56											
57											
58											
59											
60											
61											
62											
63											
64											
65											
66											
67											
68											
69											
70											
71											
72											
73											
74											
75											
76											
77											
78											
79											
80											
81											
82											
83											
84											
85											
86											
87											
88											
89											
90											
91											
92											
93											
94											
95											
96											
97											
98											
99											
100											
Total Indep			/								
Total Depend			/								
Total Claims			/								

<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <p style="font-size: 1.5em; margin: 0;">2012</p> <p style="margin: 0;">11-10-05</p> </div> <div> <p style="margin: 0;">CLAIMS ONLY</p> </div> </div>							Application Number <div style="font-size: 1.2em; margin: 0;">09821546</div>		Filing Date 	
Applicant(s)										
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend				
10 1										
10 2										
10 3										
10 4										
10 5										
10 6										
10 7										
10 8										
10 9										
10 10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
32										
33										
34										
35										
36										
37										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
Total										
Indep										
Total										
Depend										
Total										
Claims										

51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
Total						
Indep						
Total						
Depend						
Total						
Claims						

8
 69
 77